

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 8-1-08 new and 10-1-08 renewal.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | 0 |
| | Commercial | | 0 |
| 2. | Automobile Physical Damag Private Passenger | | 0 |
| | Commercial | | 0 |
| 3. | Liability Other Than Auto | | 0 |
| 4. | Burglary and Theft | | 0 |
| 5. | Glass | | 0 |
| 6. | Fidelity | | 0 |
| 7. | Surety | | 0 |
| 8. | Boiler and Machinery | | 0 |
| 9. | Fire | | 0 |
| 10. | Extended Coverage | | 0 |
| 11. | Inland Marine | | 0 |
| 12. | Homeowners | | 0 |
| 13. | Commercial Multi-Peril | | 0 |
| 14. | Crop Hail | | 0 |
| 15. | Other Farmowners | 30,449 | .001% |
| | <u>Life of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No filing applies to entire state.

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Adopt ISO 2007 loss cost (filing reference FR-2006-RLA1 and to
change company deviations.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Agri General Insurance Company

Name of Company

Steve C. Harms - President & Chairman Board

Official - Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED

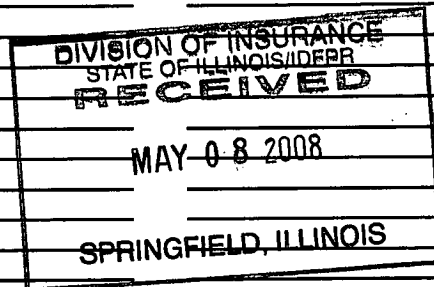
MAY 29 2008

SPRINGFIELD, ILLINOIS

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 7/3/08.

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Mobilehome</u> | <u>\$774,921</u> | <u>-0.8%</u> |
| Line of Insurance | | |



Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory

organization, specify organization): This filing includes a revision to the distinct charge to cover the net cost of reinsurance in Allstate Indemnity for the Manufactured Home program in the state of Illinois.

Allstate's revised 2008 reinsurance cost for the Manufactured Home program is minimal, so we have selected to set the reinsurance rate adjustment factor to zero. This revised factor will apply to the calculation of the reinsurance charge for all policies, and will have the same effect as removing the reinsurance charge.

Allstate will evaluate reinsurance cost periodically, preserving the rating structure will enable Allstate to monitor and update the reinsurance rate adjustment factor in the future as appropriate.

The overall impact of changes set forth in this filing is -0.8

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Allstate Indemnity Company

Name of Company

Stephen J. Burbick - State Filings Director

Official - Title

H29219D

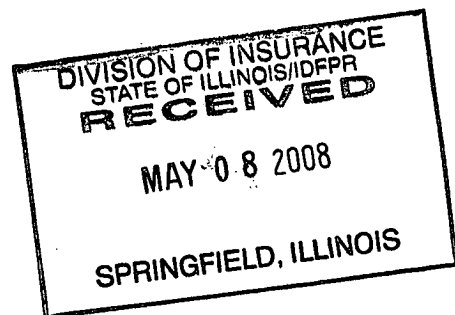
SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 7/3/08.

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Mobilehome</u> | <u>\$1,248,820</u> | <u>-0.3%</u> |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory



organization, specify organization): This filing includes a revision to the distinct charge to cover the net cost of reinsurance in Allstate Insurance Company for the Mobile Home program in the state of Illinois.

Allstate's revised 2008 reinsurance cost for the Mobile Home program is minimal, so we have selected to set the reinsurance rate adjustment factor to zero. This revised factor will apply to the calculation of the reinsurance charge for all policies, and will have the same effect as removing the reinsurance charge.

Allstate will evaluate reinsurance cost periodically, preserving the rating structure will enable Allstate to monitor and update the reinsurance rate adjustment factor in the future as appropriate.

The overall impact of changes set forth in this filing is -0.3%.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Allstate Insurance Company
Name of Company

Stephen J. Burbick - State Filings Director
Official - Title

H29219D

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective May 29, 2008.

| (1) | Estimated | Estimated |
|-------------------------------|---|---|
| <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Farmowners</u> | <u>\$462,544</u> | <u>+7.5%</u> |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): On behalf of the American States Insurance Company and American Economy Insurance Company, we wish to submit the following information for use in your state. We are increasing all FARMAC® coverage rates. The overall impact of these changes is +7.5%.

We are also revising the Mine Subsidence rates in accordance with recent changes.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

| | |
|---|--|
| DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR RECEIVED MAY 27 2008 SPRINGFIELD, ILLINOIS | American Economy Insurance Company Name of Company Merilyn Overton, Senior Filings Analyst Official - Title |
|---|--|

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 08/01/2008

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---------------------------------------|---|---|
| 1. Automobile Liability Private | | |
| Passenger Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Recreational Vehicle</u> | <u>\$289,797</u> | <u>0.01%</u> |
| Line of Insurance | | |

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Loss Free Discount has been lowered to 5% for Motor Homes and 7% for Travel Trailers for the second and subsequent renewals, we have removed the UIM limit of 20/40 because UIM coverage does not exist when the UM limit equals 20/40, we have lowered the base rates in both MH and TT

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

American Modern Home

Name of Company

Traci Burbage- Compliance Analyst

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

07-23-08 New &
09-26-08 Renewal

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|--------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Pers Umbrella</u> | <u>\$44,917</u> | <u>0.0%</u> |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Yes - only to Incidental Farming coverage

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Our base rate for Incidental Farming coverage is being lowered from \$85 to \$40

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Am Select Insurance Co.

Name of Company

Karen Dixon,
Production Specialist

Official - Title

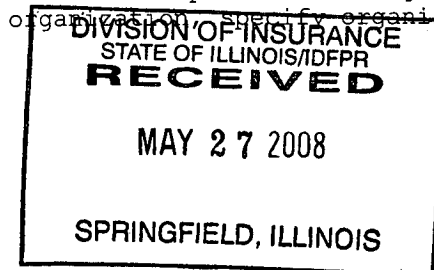
SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective May 29, 2008.

| (1) Coverage | (2) Estimated Annual Premium Volume (Illinois)* | (3) Estimated Percent Change (+ or -)** |
|-------------------------------|--|--|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other Farmowners | \$2,057,854 | +7.5% |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization):



On behalf of the American States Insurance Company and American Economy Insurance Company, we wish to submit the following information for use in your state. We are increasing all FARMAC® coverage rates. The overall impact of these changes is +7.5%.

We are also revising the Mine Subsidence rates in accordance with recent changes.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

American States Insurance Company
Name of Company

Merilyn Overton, Senior Filings Analyst
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/08

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 265,522 | -30.2% |
| 10. Extended Coverage | 205,549 | 6.5% |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Earthquake</u> | 4,651 | -33.6% |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

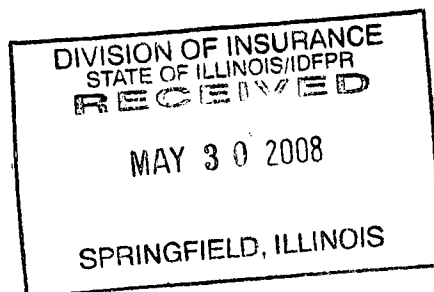
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO Revised loss costs and related rules found in filing designation numbers CF-2007-RLA1,
CF-2006-RLA1, CF-2006-REQ1 and CF-2006-REQRU

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Employers Mutual Casualty Company

Name of Company

Don Coughenower
Assistant Vice President

Official - Title

SUMMARY SHEET

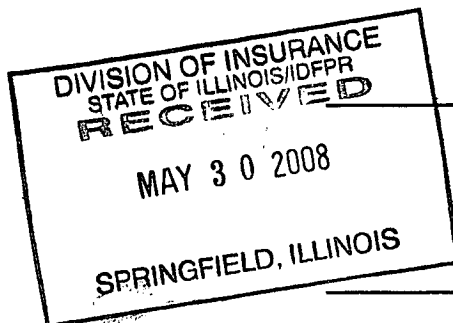
Change in Company's premium or rate level produced by rate
revision effective October 1, 2008

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Businessowners</u> | <u>2,731,740</u> | <u>1.3%</u> |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: We are revising the Employment Practices Liability (EPLI) rates.

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): _____

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.



Grinnell Mutual Reinsurance Company
Name of Company

Mary Wandro

Official - Title

SUMMARY SHEET

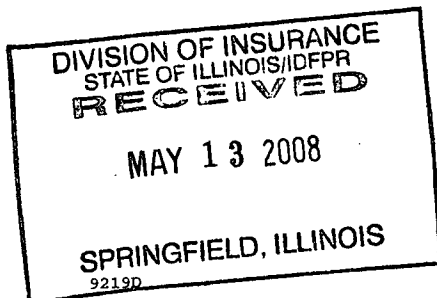
Change in Company's premium or rate level produced by rate
revision effective ~~10-1-8~~ 10-1-8.

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Businessowners</u> | <u>2,826,557</u> | <u>-2.3%</u> |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: The Loss Cost Multiplier Reductions apply only to the
Convenience Store & Mini-Storage Warehouse Target Markets

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): _____

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.



Grinnell Mutual Reinsurance Company
Name of Company

Mary Wanders
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/08

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 1,855,941 | -28.6% |
| 10. Extended Coverage | 1,270,038 | 6.4% |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Earthquake</u> | 27,780 | -33.9% |
| Line of Insurance | | |

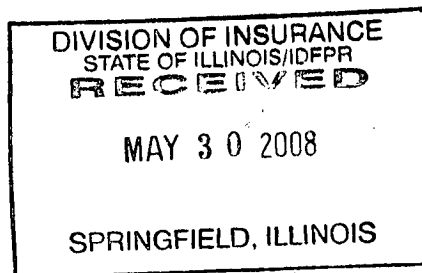
Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO revised loss costs and related rules found in filing designation numbers CF-2007-RLA1,
CF-2006-RLA1, CF-2006-REQ1 and CF-2006-REQRU

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Illinois EMCASCO Insurance Company
Name of CompanyDon Coughenower
Assistant Vice President
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 8-1-08 new and 10-1-08 renewal.

| (1) Coverage | | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-------------------|---|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | 0 |
| | Commercial | | 0 |
| 2. | Automobile Physical Damag Private Passenger | | 0 |
| | Commercial | | 0 |
| 3. | Liability Other Than Auto | | 0 |
| 4. | Burglary and Theft | | 0 |
| 5. | Glass | | 0 |
| 6. | Fidelity | | 0 |
| 7. | Surety | | 0 |
| 8. | Boiler and Machinery | | 0 |
| 9. | Fire | | 0 |
| 10. | Extended Coverage | | 0 |
| 11. | Inland Marine | | 0 |
| 12. | Homeowners | | 0 |
| 13. | Commercial Multi-Peril | | 0 |
| 14. | Crop Hail | | 0 |
| 15. | Other Farmowners | 1,571,307 | .001% |
| Life of Insurance | | | |

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No filing applies to entire state.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Adopt ISO 2007 loss cost (filing reference FR-2006-RLA1 and to change company deviations.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Indemnity Insurance Company of North America c/o Rain and Hail LLC

Name of Company

Steve C. Harms - President & Chairman Board

Official - Title



SUMMARY SHEET

Change in Company's Premium or rate level produced by rate revision effective

7/1/2008

| (1) | (2) | (3) |
|-------------------------------|--|--|
| <u>Coverage</u> | <u>Annual Premium</u> <u>Volume (Illinois)*</u> | <u>Percent</u> <u>Change (+ or -)**</u> |
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Garage</u> | 1,023,539 | -41.1% |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

NO

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are adopting ISO's loss cost filings CA-2007-BRLA 1, CA-2006-RZRLC and CA-2005-RLC01

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

West Bend Mutual Insurance Company
Name of Company

Pam Allison, CPCU, AU - Product Development Specialist
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 07-23-08 New & 09-26-08 Renewal

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|--------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Pers Umbrella</u> | <u>\$99,798</u> | <u>-0.3%</u> |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Yes - only to Incidental Farming coverage

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Our base rate for Incidental Farming coverage is being lowered from \$85 to \$40

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Westfield Insurance Co.

Name of Company

Karen Dixon,
Production Specialist

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

07-23-08 New &
09-26-08 Renewal

| (1) | (2) | (3) |
|--|--|--------------------------------------|
| <u>Coverage</u> | <u>Annual Premium Volume (Illinois)*</u> | <u>Percent Change (+ or -)**</u> |
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Pers Umbrella</u> Line of Insurance | \$103,377 | -0.2% |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Yes - only to Incidental Farming coverage

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Our base rate for Incidental Farming coverage is being lowered from \$85 to \$40

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Westfiedl National Ins. Co.

Name of Company

Karen Dixon,
Production Specialist

Official - Title